

MISCELLANY

Under this department are ordinarily grouped: News Items; Letters; Special Articles; Twenty-five Years Ago column; California Board of Medical Examiners; and other columns as occasion may warrant. Items for the News column must be furnished by the fifteenth of the preceding month. For Book Reviews, see index on the front cover, under Miscellany.

NEWS

Coming Meetings

American Medical Association, San Francisco, June 7-11, 1938. Olin West, M. D., 535 North Dearborn Street, Chicago, Secretary.

California Medical Association, Hotel Huntington, Pasadena, May 9-12, 1938. F. C. Warnshuis, M. D., 450 Sutter Street, San Francisco, Secretary.

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American College of Surgeons, Chicago, October 25-29. George W. Crile, M. D., 40 East Erie Street, Chicago, Chairman, Board of Regents.

Association of American Medical Colleges, San Francisco, October 24-26. Fred C. Zapffe, M. D., 5 South Wabash Avenue, Chicago, Secretary.

Association of Military Surgeons of the United States, Los Angeles, October 14-16. H. L. Gilchrist, M. D., Army Medical Museum, Washington, D. C., Secretary.

Interstate Postgraduate Medical Association of North America, St. Louis, October 18-22. W. B. Peck, M. D., 27 East Stephenson Street, Freeport, Illinois, Managing Director.

Oregon State Medical Society, Salem, October 21-23. Morris L. Bridgeman, M. D., 1020 S. W. Taylor Street, Portland, Secretary.

Pacific Coast Society of Obstetrics and Gynecology, San Francisco, November 3-6. T. Floyd Bell, M. D., 400 Twenty-ninth Street, Oakland, Secretary.

Medical Broadcasts*

Los Angeles County Medical Association

The radio broadcast program for the Los Angeles County Medical Association for the month of October is as follows:

Saturday, October 2—KFI, 9:15 a. m., The Road to Health;

KFAC, 10:15 a. m., Your Doctor and You.

Thursday, October 7—KECA, 10:45 a. m., The Road to Health.

Saturday, October 9—KFI, 9:15 a. m., The Road to Health;

KFAC, 10:15 a. m., Your Doctor and You.

Thursday, October 14—KECA, 10:45 a. m., The Road to Health.

Saturday, October 16—KFI, 9:15 a. m., The Road to Health;

KFAC, 10:15 a. m., Your Doctor and You.

Thursday, October 21—KECA, 10:45 a. m., The Road to Health.

Saturday, October 23—KFI, 9:15 a. m., The Road to Health;

KFAC, 10:15 a. m., Your Doctor and You.

Thursday, October 28—KECA, 10:45 a. m., The Road to Health.

Saturday, October 30—KFI, 9:15 a. m., The Road to Health;

KFAC, 10:15 a. m., Your Doctor and You.

Association of Military Surgeons of the United States.

The Pacific Fleet will be in the port of Los Angeles during the convention of the Association of Military Surgeons on October 14 to 16, 1937, at the Ambassador Hotel. An unusually interesting program has been prepared, and the scientific and technical exhibits will be the largest in the history of the organization. Physicians, surgeons, dentists, and veterinarians, of the Army, Navy, Marine Corps, CCC camps, and the Veterans' Administration will be present. For additional information write to Robert L. Lewin, Ambassador Hotel, Los Angeles.

* County societies giving medical broadcasts are requested to send information as soon as arranged (stating station, day, date and hour, and subject) to CALIFORNIA AND WESTERN MEDICINE, 450 Sutter Street, San Francisco, for inclusion in this column.

Industrial Hygiene.—Industrial hygiene, which means protection and improvement of the general health of industrial workers, has long been recognized as an important problem in public health work. Figures from the United States census for 1930 show that approximately fifteen million persons are gainfully employed in manufacturing and mechanical industries and in the extraction of minerals. These people face specific occupational accident and disease hazards.

Occupational accident hazards are already being eliminated with a large degree of success through the cooperative efforts of private industry, the various state labor departments, and the United States Department of Labor. There is reason to believe that occupational disease hazards may similarly be eliminated.

Some of these hazards are: silica dusts, asbestos dusts, lead, mercury, arsenic, chromium, radium, selenium, phosphorus, carbon monoxid gas, hydrogen sulphid gas, carbon tetrachlorid, methanol, benzol, caustic liquids, halogenated naphthas, intense heat, dampness, and defective lighting.

Separates Virus From the Tissues.—A merry-go-round which breaks down disease-causing viruses has convinced some scientists that a virus is deadly merely because of the arrangement of atoms within its molecules.

This new conception of the theory that pure chemicals caused the permanent muscle rigidity of infantile paralysis, the constant sniffing of the common cold, and many other diseases, has been discussed by Dr. Ralph W. G. Wyckoff of the Rockefeller Institute for Medical Research.

The merry-go-round which was used in finding this new approach to the mechanism, treatment and control of disease, is a glorified cream separator called an ultracentrifuge, which is driven by air and floats on air bearings. It spins at thousands of revolutions per second and creates forces from 250,000 to 300,000 times the force of gravity.

Such forces separate the disease viruses from the animal or plant tissues which they have infected and make it possible to study them as pure substances for the first time. Heretofore they have been invisible under the most powerful microscopes. Their presence was deduced only from the fact that crude extracts from a diseased plant or animal would infect healthy plants or animals even though no bacteria could be found in the juices.

Many medical men view this discovery as the greatest single advance in the study and treatment of disease since Louis Pasteur proved that tiny bacteria cause disease, according to Stephen J. McDonough, Associated Press science writer.

Research has convinced scientists at Rockefeller Institute that the disease-causing ability of the viruses cannot be separated from their construction as large protein molecules, rich in nitrogen and thousands of times larger than the average molecules found in other forms of matter.

Doctor Wyckoff declares, however, that it is possible to whirl these viruses fast enough in the ultracentrifuge to break up the virus molecules just as an ice cube is broken up. Then they no longer have the ability to produce disease.

"A new field of research into the mechanism and control of disease is opened up by the possibility of treating its cause as a pure chemical compound," Doctor Wyckoff said.

This indicates the possibility of developing "vaccines" from pure viruses which, when injected into human beings, will protect them against infantile paralysis, cold, smallpox, and other diseases.

Work with the ultracentrifuge in isolating the pure viruses has also bridged the gap between the dead protein molecules of simple form and the living bacteria, thus offering a new possibility of "attaching precise meaning to the term 'alive,'" and explaining what life is, Doctor Wyckoff declared.—*The New York Times*.

United States Public Health Service: Syphilis and Gonorrhea Statistics.—Health officers' monthly statement of venereal diseases reported for the month of June, 1937: This statement is issued monthly for the information of health officers in order to furnish current data as to the prevalence of the venereal diseases. The following reports were received from state health officers. The figures are preliminary and subject to correction. It is hoped that this will stimulate more complete reporting of these diseases.

State	—Syphilis—		—Gonorrhea—	
	Cases Reported During Month	Monthly Case Rates Per 10,000 Population	Cases Reported During Month	Monthly Case Rates Per 10,000 Population
California	1,884	3.11	1,879	3.10
<i>City</i>				
*Los Angeles, Calif.
Oakland, Calif.	32	1.06	31	1.02
San Francisco, Calif.	114	1.70	145	2.16

* No report for the current month.

Taking the Mystery Out of Medicine.—One of the principal ambitions of the Division of Health and Science of the 1939 Golden Gate International Exposition, which will be held on the world's largest man-made island in San Francisco Bay, is to take the mystery out of medicine.

This intention has been announced by a voluntarily formed committee of leading western medical men who are working out the details of the health exhibit for the World's Fair. The major emphasis will be, they say, on the prevention of disease rather than on its treatment. In keeping with the Exposition's Pageant of the Pacific theme, the contributions of Pacific nations toward the health of humanity will be dramatized. Proper nutrition, practical knowledge of vitamins, sanitation, vaccination, and other matters of public health will be explained for the layman.

The exhibit plans already have the cooperation of several American universities, notably the University of California, Stanford, the University of Southern California, California Institute of Technology, Harvard University, University of Oregon, and University of Washington.

The committee includes Dr. Chauncey D. Leake, Chairman, head of the Department of Pharmacology, University of California Medical School, an international expert on anesthetics and amebic dysentery; Dr. J. C. Geiger and Dr. Paul Barrett of the San Francisco Department of Health; Dr. Walter Brown of Stanford University, one-time president of the American Public Health Association; Dr. Francis Carmelia, representing Dr. Thomas Parran, Jr., Surgeon-General of the United States; Dr. L. R. Chandler, Dean of the Stanford University Medical School; Dr. Walter Dickie, head of the California State Department of Public Health; Dr. William Dock, head of the Department of Pathology, Stanford University, a brilliant investigator in the abnormalities of the circulatory system; Mr. Waldemar Gnerich, Secretary, Northern California Retail Druggists' Association, representing druggists' associations of the eleven western states; Dr. Charles Gilman Hyde, University of California engineer; Dr. T. Henshaw Kelly, President of the San Francisco County Medical Society, an experienced public relations worker for the California Medical Association; Dr. John Leggett, representing the California State Dental Association; Dr. Wilfrid Robinson, representing the American Dental Association; Dr. K. F. Meyer, Director of the Hooper Foundation and head of the University of California Medical School's Department of Bacteriology; Dr. Guy Millberry, Dean of the University of California School of Dentistry, official representative of the American Public Health Association; Dr. Langley Porter, Dean of the University of California Medical School; Dr. William Shepard, Metropolitan Life Insurance Company, representing the American Public Health Association; Dr. Nina Simmonds, University of California Medical School, a nutrition authority; Dr. F. C. Warnshuis, Secretary of the California Medical Association; and Dr. C. L. A. Schmidt, head of the Department of Biochemistry, University of California.

The committee is working out the details of its exhibit with Milton Silverman, head of the Health and Science Division for San Francisco's 1939 World's Fair.

Division of Public Health Nursing.—The establishment of a division of public health nursing in the California State Department of Public Health has been announced by Dr. Walter M. Dickie, Director. Miss Rena Haig, who has been with the State Department of Public Health since October, 1936, has been appointed chief of the division. All public health nurses in the various bureaus of the State Department of Public Health will be attached to the division and will be under Miss Haig's direction.

The first public health nurse was employed in the State Department of Public Health in 1917. In the twenty intervening years public health nurses have been employed from time to time in the various bureaus of the department. The position of supervisory nurse, created in 1930, was discontinued in 1932, when budget reductions became necessary.

The Division of Public Health Nursing has been established for the purpose of coordinating public health nursing activities within the State Department of Public Health and giving more adequate service to all public health nurses in the State.

California Tuberculosis Record.—The tuberculosis death rate has fallen from 127.7 per 100,000 population in 1925 to 80 in 1935. This is a reduction of more than 37 per cent. In 1906, the death rate for this disease was 235.7 per 100,000 population. The drop from this high rate indicates the progress that has been made in tuberculosis control in California.

The State Board of Public Health has been active in raising the standards of care in county hospitals by means of the State subsidy to approved institutions, such funds being appropriated from the State treasury and allocated to the counties for expenditure.

Imported Tuberculosis.—The problems related to the migration of tuberculosis cases in advanced stages to California, particularly to Southern California, are very acute. This applies not only to migration from other states, but also to migration from Mexico. About 20 per cent of all tuberculosis deaths in California are among Mexicans. Some of the counties of Southern California are required to spend many thousands of dollars in the care and treatment of these foreign-born residents. If more satisfactory accomplishments in shutting off the tide of this immigration were made available, considerable might be accomplished in reducing the tuberculosis mortality rate of this State. It is doubtful that any other state in the Union makes such excellent efforts in the care and treatment of its indigent patients. This alone is an enormous factor in reducing the mortality rate. The State Board of Public Health is a leading factor in the provision of high standards of care and treatment for the State's tuberculous.

CALIFORNIA
Number of Deaths from Tuberculosis With Rates Per
100,000 Population, 1906-1935

Year	Number of Tuberculosis Deaths	Rates Per 100,000 Population
1906	4,437	221.8
1907	4,607	225.5
1908	4,565	209.0
1909	4,673	203.9
1910	4,872	203.0
1911	5,114	203.9
1912	5,128	196.0
1913	5,402	198.3
1914	5,320	187.8
1915	5,551	188.9
1916	5,267	172.8
1917	5,457	172.9
1918	5,888	180.4
1919	5,678	168.3
1920	5,397	152.6
1921	5,427	144.5
1922	5,847	147.1
1923	5,724	136.5
1924	6,023	136.5
1925	5,896	127.3
1926	5,794	119.4
1927	5,960	117.6
1928	6,074	114.8
1929	5,855	106.3
1930	5,629	98.2
1931	5,292	88.9
1932	5,020	81.3
1933	4,619	81.9
1934	4,611	81.7
1935	4,516	80.0

American Board of Obstetrics and Gynecology: Examinations.—The next examinations (written and review of case histories) for Group B candidates will be held in various cities of the United States and Canada on Saturday, November 6, 1937, and Saturday, February 6, 1938. Application for admission to these examinations must be filed on an official application form in the office of the secretary at least sixty days prior to these dates.

The general oral, clinical, and pathological examinations for all candidates (Groups A and B) will be conducted by the entire Board, meeting in San Francisco on June 13 and 14, 1938, immediately prior to the meeting of the American Medical Association.

Application for admission to Group A examinations must be on file in the secretary's office before April 1, 1938.

For further information and application blanks, address Dr. Paul Titus, Secretary, 1015 Highland Building, Pittsburgh, (6), Pennsylvania.

Control of Epidemic Diseases in California.—The terminals of the greatest trade routes with Oriental countries, and some tropical countries as well, are in the two great ports of the Pacific—San Francisco and Los Angeles. In spite of the effective quarantine that is maintained by the United States Public Health Service, California has certain definite problems related to the importation of serious and rapidly fatal infections from Oriental and tropical countries. It is impossible to discover many of these infections through the routine examinations that are conducted by port authorities and they creep into California occasionally in spite of the efficient safeguards that are provided. Virulent smallpox from Oriental ports occasionally finds its way into California communities. This is not the type of smallpox that is ordinarily encountered throughout the United States, but a highly virulent form, extremely rapid in its death-dealing performance. A severe form of epidemic meningitis has been brought into California by Filipinos, and their contacts in California occasioned considerable alarm, necessitating an embargo, upon Presidential proclamation, covering passengers from certain Oriental ports.

California continually faces acute problems in the prevention of plague, imported epidemic meningitis, virulent smallpox, typhus fever, and other infectious diseases which are uncommon to us but which are common in Asiatic countries. To be prepared against invasions of these devastating diseases is a matter of the utmost necessity. It is only through the maintenance of a highly trained and efficient personnel, skilled in the prevention and control of communicable diseases, that California is able to provide safeguards against these menaces, not only to the health of its own communities but to all other communities throughout the United States as well.

Among the more unusual diseases which the California Department of Public Health has been obliged to study in order to develop methods of control are coccidioid granuloma, Rocky Mountain spotted fever, psittacosis, tularemia, and relapsing fever. In order to perform the necessary epidemiological investigations which the presence of these diseases requires, it is necessary to employ high-grade technical assistants. In fact, it would seem that one of the chief functions of the California State Department of Public Health now lies in the provision of the highest grade of technical service to supplement and augment the efficient public health service that is provided by local communities throughout the State. During recent years the development of local health units has been most rapid. This relieves the State Department of Public Health of much petty routine and the unnecessary burden-bearing which was the rule during preceding years. Its staff is relieved for the performance of duties which local health departments are not equipped to carry out. It is thus better able to care for the countless emergencies that arise and which do not lie within the province of local health departments. It is possible that the time will come when the State Health Department may consist only of the most highly trained specialists, whose duties will lie solely along lines of research and investigation, providing only the skilled services which local communities are unable to afford or provide.

Public Health Service Reprint on Sulphanilamid.—The United States Government Printing Office at Washington, D. C., has recently brought off the press reprint No. 1826 from the Public Health reports dealing with Studies in Chemotherapy, the article being No. 5 (Sulphanilamid, Serum, and Combined Drug and Serum Therapy in Experimental Meningococcus and Pneumococcus Infections in Mice). Reprints may be had at the price of five cents each by writing to the Superintendent of Documents, Washington, D. C.

Certification and Licensure: By the State Board of Public Health.—Year by year the Legislature imposes additional powers of inspection, standardization, and licensure upon the State Board of Public Health. The issuance of licenses is based upon the maintenance of standards established by the board. A wide range of subject matter is covered. Since the enforcement of these standards has a far-reaching effect upon the public health and welfare of each local community, a list of these mandatory functions is appended:

<i>License, Certificate of Permit</i>	<i>Number Issued to Jan. 1, 1937</i>
Cannery (year 1936)	186
Cold storage (year 1936)	19
Maternity home or hospital	864
Water supply	226
Sewage disposal	402
Shellfish	41
Clinics	680
Aviary	167
Tuberculosis sanatoria (public and private) rest homes
Laboratory	83
<i>Certificates to Individuals</i>	
Registered nurse	30,002
Public health nurse	1,676
Laboratory technician	904

Louisiana's Adventure Into State-Supported Hospitalization.—A million dollars' worth of small, free, "poor-man hospitals" and clinics are being scattered about Louisiana by Governor Richard W. Leche.

"When people are too poor to pay for private medicine and hospitalization they are too poor to travel a long distance, so we are bringing new hospitals to the people," said Governor Leche recently in explaining the program.

"Free hospitalization for the destitute in many states is being conducted on a county or municipal basis, but we believe Louisiana is a pioneer in establishing a state-wide system."

The plan calls for a network of clinics and small five-bed to ten-bed wards in private hospitals under contract to the state. The cost of surgical and medical care, nursing, and other services will be defrayed by the state on a fee basis.

Another part of the state's hospitalization program has to do with the \$12,000,000 rebuilding of state-subsidized, ancient and famous Charity Hospital at New Orleans, where one of the largest medical centers of the country is being created with the aid of state and federal funds. Plans are also under way for construction of new hospitals at Alexandria and Lafayette, large towns in the central part of the state.

Administration of the "poor-man hospitals" has been placed in charge of a state hospital board created by the legislature in keeping with a campaign promise of Governor Leche, who was lifted from the judiciary to the gubernatorial chair.

The immediate supervision devolves upon A. R. Johnson, young and aggressive public welfare commissioner, in whose agency has been concentrated every service the state is able to provide for the poor. Johnson superintends the clearing of all direct relief payments, all enrollments in the CCC, certifications to the WPA, surplus commodity distribution, the social security program for old age relief, maternal and child welfare, and industrial rehabilitation.

"We are following well-tested principles of administrative efficiency by this system," said Governor Leche recently. "We obtain better results at less cost, and we avoid chasing the needy around to a dozen places before learning which service they need and are entitled to receive. It is simply straight-line administration."

Postgraduate Symposium on Heart Disease.—The Heart Committee of the San Francisco County Medical Society will hold its eighth annual postgraduate symposium on heart disease at the University of California, Stanford University, and San Francisco Hospitals.

November 17 to 18, 1937.—The course will cover the various aspects of heart disease, including diagnosis, prognosis, and treatment. Recent advances in cardiology will be reviewed and evaluated. Clinics with practical demonstrations will be held, and newer diagnostic procedures and methods of treatment will be presented and evaluated.

The registration fee will be \$2, and will also entitle the registrant to membership in the California Heart Association for the year 1938. If you are planning to attend, will you please notify the Secretary as soon as possible? Checks should be made payable to the San Francisco Heart Committee, and mailed to the Secretary. Your membership card, which will also serve as your registration card, will then be mailed to you, and also a copy of the program, as soon as the program is completed. For further information write to Elbridge J. Best, M. D., Secretary, San Francisco Heart Committee, 604 Mission Street, Room 802, San Francisco.

Industrial Accident Commission of California: Safety Department.—Mr. C. H. Fry, Chief of the Bureau of Industrial Accident Prevention in the Industrial Accident Commission of California recently in attendance at the Western Safety Conference of the Third Annual Safety Conference held in Portland, Oregon, as chairman of the Board of Governors of the conference, issued the following statement expressing in brief the origin and purpose of these conferences:

The first meeting of the Western Safety Conference was called at the express direction of Governor Frank F. Merriam in 1935 at San Francisco. On that occasion accident problems peculiar to the West were thoroughly discussed. Conclusions reached were not surprising. Nothing comparable to our huge logging operations will be found anywhere in the United States or Canada other than in the western portion of America. Eastern loggers, used to Eastern methods and handling comparatively small trees, gasp for breath when they visit Western forests. Boring through our tremendous mountains, composed of solid rock, presents problems with which few engineers of the East have had experience. Railroad operations make the Eastern railroad man thankful that the responsibility is not his. Our water impounding projects, such as Boulder, Bonneville and Grand Coulee dams, are of such magnitude that they almost defy human imagination. Mining operations are vastly different from those of the Middle West and East.

Our well-open spaces and well paved highways encourage high speed driving. This requires the attention of individuals who are close to these problems; hence, an organization composed of persons conversant with the West and the logical answer to prevention of the growing accident menace.

The airplane, automobile and radio have almost obliterated city, county and state boundary lines. Citizens cannot satisfactorily comply with one set of safety laws or orders today and another set tomorrow. The means found effective in preventing a certain type of accident in one state should also be effective in another. The purpose of the Western Safety Conference is to secure the maximum possible uniformity in safety rules, laws and order.

In the early part of 1935, the President of the United States, in one of his radio talks, broadcast to the nation, pointed out the terrific death toll caused by automobile accidents in the United States. His statement was a challenge to the ingenuity and support of all the states of the Union to do something about it.

While the President discussed only the death toll taken by automobile accidents, his challenge and warning applied with equal force to the cause of deaths in the home and every other phase of our complex human life. The effect is the same on the individual killed and those dependent upon him.

To stand by idly and permit this avalanche of deaths to continue would justify the charge that those who are concerned with these problems had shirked their duty.

Hence the Western Safety Conference with its inspirational, educational, and helpful program, is uniting the people of the West in the struggle for safety, health and happiness, and in the battle against accidental injuries, sickness, and death.

Record College Influx Foretold.—Office of Education statisticians predicted recently that fewer children will enter elementary schools this fall, but more youths will go to school.

The country's falling birth rate has kept the grade-school enrollment on the decline since 1930, they said. In seven years the number of pupils has dropped one million.

College enrollments, however, will reach a new high. About one out of every one hundred persons will be in college or university this fall.

The Office of Education said thirty-three million children and adults will join in the back-to-school movement this fall.—*Los Angeles Times*.

Division of Immigration and Housing: Industrial Accident Commission of California.—"During the month of July, 59 labor camps were inspected; 22 camps were listed as good, 31 fair, and 6 bad. Of the total number of camps inspected, 38 were old camps and 16 new ones; five reinspections were made. In the camps inspected it was found that 4,795 occupants were American-born, while 1,273, were foreign-born, making a total of 6,068, of which 94 were men, 3,469 women, and 2,505 children.

"During the month 111 automobile camps were inspected; 52 were listed as good, 49 fair, 8 bad, and one closed. Two hundred and fifty-seven housing inspections were made.

"Camps for seasonal workers were in better condition than formerly in several of the counties where large numbers of workers are needed to harvest crops. Contra Costa County camps show a decided improvement; several of the operating companies installed sanitary units of permanent construction. Such improvements are significant, indicating a decision to plan for the future and be ready when the crews are needed. Other counties and districts are also falling into line with our program."

Chicago Takes Steps Against Syphilis.—Years ago Chicago pioneered in a campaign to drive out venereal disease quacks and acquaint the public with the facts concerning syphilis and gonorrhea. In 1935, the *Chicago Tribune* earned the distinction of being the first newspaper to publish special full-page feature articles on these diseases. Now, once more Chicago leads the way in efforts to stamp out syphilis by polling her citizens as to their willingness to submit to blood tests to ascertain the presence of this disease.

A million ballots, each with a franked return envelope enclosed, were sent out by the Chicago Board of Health, cooperating with the United States Public Health Service. This was the form:

HELP TO PLACE SYPHILIS UNDER CONTROL

1. In strict confidence, and at no expense to you, would you like to be given, by your own physician, a blood test for syphilis? Yes. . . . No. . . . [Please check one.]

2. Including yourself, indicate on one of the two lines below the age of each member of your family who would like to have a blood test. [a] The age of each male who would like to have a blood test:

[b] The age of each female who would like to have the blood test:

Please Do Not Sign Your Name

With the ballot went a letter of explanation from Dr. Herman N. Bundesen, President of the City Board of Health.

The aim of the poll is (1) to register public response to the national crusade against venereal disease, and (2) to get an actual census of syphilis prevalence in Chicago, as a basis for a mass attack. Returns have been prompt and encouraging, though it will naturally be some time before a full report is possible. Coöperating in the plan are the Illinois Social Hygiene League and other voluntary agencies, including Mayor Kelley's Committee of One Hundred for the Control of Syphilis and Gonorrhea, of which Dr. Louis E. Schmidt is chairman. Dr. Frank J. Jirka, State Health Director, and Dr. O. C. Wenger of the United States Public Health Service are actively assisting.

San Francisco Community Chest.—Members of the San Francisco City and County Society are taking an active part both in year-round phases of Community Chest activity and in the annual campaign, which will be conducted during October 20 to November 5 this year. Dr. P. K. Gilman is chairman of the Chest Health Council and Dr. Ralph Reynolds is one of the most active members of the Speakers' Bureau. Among the section chairmen under Doctor Gilman are: Dr. E. J. Best, convalescent care; Dr. Charles Barnett, social hygiene; Dr. L. R. Chandler, out-patient clinics; Dr. George S. Johnson, mental hygiene; Dr. H. E. Thelander, child hygiene; Dr. John P. Strickler, heart; and Dr. William C. Voorsanger, tuberculosis. The slogan for this year's appeal in San Francisco is "Buy Health and Happiness for Them." The campaign will seek to emphasize the practical, as well as the ethical reasons for support of private health and welfare agencies.

Child Experts Present Papers at Minneapolis.—Cumulative records covering behavior studies of two hundred adolescents since 1932 by the Institute of Child Welfare of the University of California, were presented to the annual meeting of the American Psychological Association at Minneapolis by Dr. Harold E. Jones, Director of the Institute. The records contained interesting developments in physical development, motor abilities, learning, intelligence achievement and personality characteristics, and a description of the manner in which these results were obtained.

Dr. W. Jeffret Cameron, research associate in the Institute, also presented a paper containing findings from an eight-year study of a single adolescent. This study included physiological determinations, observations of social behavior, reading ability and school achievement scores. Both papers were illustrated with slides.

Accompanying both papers were suggestions as to how the findings made by the two doctors might be applied to everyday problems of adolescence in the home and the school.

Venereal Diseases Reported.—An improvement is noted in the reporting of cases of gonorrhea and syphilis during the past three years. Most of such cases have been reported from public clinics, but private practitioners are now reporting more cases than heretofore. During the World War, starting as an emergency measure, a bureau of venereal diseases was maintained within the State Department of Public Health—the first such bureau to be established in the United States. Through lack of funds, in 1920, the bureau was discontinued. It is believed that with the enactment of specific legislation and the provision of additional funds, by the State, definite progress may be made in bringing these diseases under a better degree of control.

<i>Gonorrhea Cases Reported in California, 1920-1936</i>		<i>Syphilis Cases Reported in California, 1920-1936</i>	
Year	Cases Reported	Year	Cases Reported
1920	5,306	1920	4,498
1921	4,709	1921	4,220
1922	5,060	1922	5,188
1923	5,704	1923	5,983
1924	5,265	1924	6,546
1925	5,391	1925	6,931
1926	5,570	1926	6,369
1927	5,348	1927	6,573
1928	5,593	1928	7,538
1929	5,842	1929	8,073
1930	7,001	1930	8,455
1931	8,123	1931	9,335
1932	8,702	1932	11,717
1933	7,817	1933	10,737
1934	10,459	1934	11,820
1935	10,630	1935	11,957
1936	12,118	1936	11,725

The main objectives in the present State plan for venereal disease control consist of (a) the provision of adequate facilities for the diagnosis and control of syphilis; (b) provision of educational facilities leading to advances in methods of treatment and control of syphilis; (c) education of the general public in all matters pertaining to venereal diseases and their control; (d) stimulation of case reporting and the provision of adequate supervision over active cases of syphilis; (e) intensive and complete investigations of early and potentially infectious cases of syphilis and their contacts.

American Academy of Orthopedic Surgeons.—The first West Coast meeting of the American Academy of Orthopedic Surgeons will be held on January 16 to 20, 1938, at the Hotel Biltmore, Los Angeles. Special trains will be run with stop-overs at Santa Fe, the Grand Canyon, San Francisco, and other points. For further information write to Robert L. Lewin, Hotel Biltmore, Los Angeles.

Daniels Sees Health Protection as Duty.—Josephus Daniels, United States Ambassador to Mexico, urged internationalism in health as Dr. José Siroub, Mexico's Secretary of Health, unveiled a plaque in the Health Department Building in Mexico City, on September 18, in memory of John D. Rockefeller.

"No walls are so high as to confine germs and bugs," said the United States Ambassador. "The first duty of wealth is to protect public health, not alone in its own country but also in all others."—*Los Angeles Times*.

Bovine Tuberculosis: New Jersey Eradication.—The State of New Jersey was officially designated as a modified accredited area by the United States Department of Agriculture on September 1. On that date the last two counties, Salem and Middlesex, completed the required testing of their cattle and reduced the infection to less than one-half of one per cent as shown by the tuberculin test. The state thus becomes the forty-fifth state to receive official recognition.

A considerable degree of tuberculosis previously existed among New Jersey cattle, and it was necessary to conduct a large number of tuberculin tests to detect reactors and remove them. This work has been conducted in cooperation with the State Department of Agriculture since 1918, and cooperation on the part of the cattle owners has been very satisfactory.

New Jersey has some very large herds of cattle and the dairy industry is one of much importance to the farmers of that state. Arrangements are being made to hold an Achievement Day celebration at Trenton on September 9, to be attended by persons interested in the dairy industry and other fields of agricultural activity.

Of the three remaining states that have not received official recognition, the work is most advanced in New York, where only one county is yet to be placed on the modified accredited list.

In South Dakota there are seventeen nonaccredited counties. The work has been proceeding well in South Dakota, but recently it has been necessary to temporarily discontinue most of it on account of the outbreak of anthrax.

In California there are thirty-seven counties in the non-accredited area, but state and federal employees are working on the project in that state, with prospects that some of these counties will be added to the modified accredited area within the next few months.

Health Officers' Section: League of California Municipalities.—The annual session of the Municipal Health Officers of California convened at San Jose, on September 13 to 15, 1937.

The program follows:

Monday, September 13

8:00 a. m.—Registration.

9:00 a. m.—Presiding, A. M. Lesem, M. D., San Diego, President, Health Officers' Section.

Address of Welcome, Stanley Kneeshaw, M. D., San Jose, President, Santa Clara County Medical Society.

Response, A. M. Lesem, M. D., San Diego, Director, City and County Department of Public Health.

Report of the Secretary, W. M. Dickie, M. D., Director, California State Department of Public Health.

Public Health Review of the Past Year, W. M. Dickie, M. D., State Director of Public Health.

Announcement of Committee Appointments.

2:00 p. m.—General Session, League of California Municipalities.

4:00 p. m.—Committee Meetings, Health Officers' Section.

Tuesday, September 14

9:00 a. m.—Presiding, E. F. Reamer, M. D., Modesto, Health Officer of Stanislaus County, Vice-President, Health Officers' Section.

Regulation of Clinical Laboratories Under the New Law, Wilfred H. Kellogg, M. D., Berkeley, Chief, Division of Laboratories, California State Department of Public Health.

9:20 a. m.—*Discussion*.

9:30 a. m.—*The Health Officer's Responsibility in the Management of Typhoid Carriers*, Harlin L. Wynns, M. D., San Francisco, Chief, Bureau of Epidemiology, California State Department of Public Health.

9:50 a. m.—*Discussion*, Myrnie A. Gifford, M. D., Bakersfield, Assistant Health Officer, Kern County Health Department.

10:00 a. m.—*Upper Respiratory Infections*, M. Dorothy Beck, San Francisco, Epidemiologist-Bacteriologist, Bureau of Epidemiology, California State Department of Public Health.

10:20 a. m.—*Epidemiology in Food Infections*, F. D. Sweger, Los Angeles, Los Angeles City Health Department.

10:40 a. m.—*Laboratory Methods in Food Infections*, R. V. Stone, D. V. M., Los Angeles, Director of Laboratories, Los Angeles County Health Department.

11:00 a. m.—*Sterilization of Drinking Utensils*, Jack G. Baker, Chief, Division of Food Inspection, San Diego City Department of Public Health.

12:00 m.—*Round Table Luncheon and Discussion of Public Health Legislation*. Presiding, Herbert F. True, M. D., Sacramento, City Health Officer and Representative of Health Officers' Section on Executive Board, League of California Municipalities.

2:00 p. m.—*Presiding*, I. O. Church, M. D., Oakland, Health Officer of Alameda County.

Mosquito and Malaria Control, Professor W. B. Herms, Berkeley, Department of Entomology, College of Agriculture, University of California.

2:30 p. m.—*Malaria and Mosquito Abatement in San Joaquin County*, W. T. Ingram, Stockton, Sanitary Engineer, San Joaquin Local Health District.

2:50 p. m.—*Discussion*, E. A. Reinke, Berkeley, Senior Sanitary Engineer, Bureau of Sanitary Engineering, California State Department of Public Health.

3:00 p. m.—*Industrial Hygiene*, Frank L. Kelly, M. D., Berkeley, City Health Officer.

3:20 p. m.—*Discussion*, John P. Russell, M. D., Berkeley, Chief, Industrial Hygiene, California State Department of Public Health.

3:30 p. m.—*Rabies Control in Southern California*, George Parrish, M. D., Los Angeles, Health Officer, Los Angeles City Department of Public Health.

3:50 p. m.—*Discussion*.

7:00 p. m.—*Annual Banquet—Health Officers' Section*, Saint Claire Hotel, Gold Room.

Presiding, H. C. Brown, M. D., San Jose, City Health Officer.

Address—Non-resident Indigents, Harold E. Pomeroy, San Francisco, Administrator, California Relief Administration.

Wednesday, September 15

9:00 a. m.—*Presiding*, C. H. Burchfiel, M. D., San Jose, Health Officer of Santa Clara County.

Health of the Migratory Worker, Stanford F. Farnsworth, M. D., San Francisco, Assistant Chief, County Health Work, California State Department of Public Health.

9:20 a. m.—*Discussion*, Lee A. Stone, M. D., Madera, Health Officer of Madera County.

9:30 a. m.—*The Social Security Program*, F. A. Carmella, Senior Surgeon, United States Public Health Service, San Francisco.

9:50 a. m.—*Discussion*.

10:00 a. m.—*Latest Developments in the Transmission of Plague*, C. R. Eskey, Senior Surgeon, United States Public Health Service, San Francisco.

10:20 a. m.—*Discussion*, W. H. Kellogg, M. D., Berkeley, Chief, Division of Laboratories, California State Department of Public Health.

10:30 a. m.—*Extension of Full Time Health Units*, George Uhl, M. D., San Francisco, Chief, County Health Work, California State Department of Public Health.

10:50 a. m.—*Discussion*, Fred T. Foard, Senior Surgeon, United States Public Health Service, San Francisco.

2:00 p. m.—*Presiding*, A. M. Lessem, M. D., San Diego, President, Health Officers' Section.

Coordination in the Public Health Nursing Program, Rena Haig, P. H. N., San Francisco, Chief, Division of Public Health Nursing, California State Department of Public Health.

2:20 p. m.—*Discussion*, Helen S. Hartley, P. H. N., Supervising Nurse, San Joaquin Local Health Department.

2:30 p. m.—*Education in Public Health Nursing*, Ruth Hay, P. H. N., Berkeley, Assistant Professor of Public Health Nursing, Department of Hygiene, University of California.

2:50 p. m.—*Discussion*, Anna Heisler, R. N., Nursing Consultant, United States Public Health Service, San Francisco.

3:00 p. m.—*Health Education of the Adolescent*, W. L. Halverson, M. D., Pasadena City Health Officer.

3:20 p. m.—*Discussion*.

3:30 p. m.—*The Venereal Disease Program*, Malcolm H. Merrill, M. D., San Francisco, Chief, Bureau of Venereal Diseases, California State Department of Public Health.

3:50 p. m.—*Discussion*, Herbert F. True, M. D., Sacramento, City Health Officer.

4:00 p. m.—*Prophylactic Value of Bismuth in Syphilis*, P. J. Hanzlik, M. D., San Francisco, Professor of Pharmacology, Stanford University School of Medicine.

4:20 p. m.—*Discussion*.

4:30 p. m.—*Veneral Disease Control in San Francisco*, George Becker, M. D., Chief, Bureau of Communicable Diseases, San Francisco Department of Public Health.

4:50 p. m.—*Discussion*.

5:00 p. m.—*Sulphanilamide in the Treatment of Gonorrhea*, H. M. Elliott, M. D., Los Angeles, Division of Venereal Diseases, Los Angeles City Health Department.

The roster of officers follows: Dr. A. M. Lessem of San Diego, president; Dr. E. F. Reamer of Modesto, vice-president; Dr. George Parrish of Los Angeles, vice-president; Dr. W. M. Dickie of Sacramento, Secretary-treasurer; Dr. H. F. True of Sacramento, representative on Board of Directors, League of California Municipalities.

Morbidity Reporting Improves in California.—The reporting of communicable diseases as required by law, in California, has improved greatly during recent years. The increased efficiency is indicated in the following table, which represents the total numbers of cases of such diseases reported in California since 1913. Separate tabulations for influenza and measles, annually, since 1917, are appended. Since these two diseases move in cyclic waves, their segregation emphasizes the routine efficiency with which all other communicable diseases are reported.

CALIFORNIA
Total Number Cases of Communicable Diseases Reported, 1913-1936

Year	Total	Influenza	Measles
1913	15,499	-----	-----
1914	31,792	-----	-----
1915	36,952	-----	-----
1916	36,358	-----	-----
1917	65,134	-----	-----
1918	306,194	230,845	23,018
1919	124,998	82,682	8,967
1920	138,703	66,183	17,030
1921	78,707	2,565	14,246
1922	101,576	45,433	1,048
1923	96,980	8,081	26,882
1924	108,591	1,106	27,373
1925	81,511	2,636	2,396
1926	96,255	6,097	18,281
1927	141,896	1,645	58,963
1928	144,969	46,062	4,002
1929	107,140	5,803	4,417
1930	144,653	1,778	46,968
1931	119,269	7,016	29,748
1932	126,276	17,423	13,651
1933	130,709	5,208	28,051
1934	134,823	1,555	31,962
1935	154,004	4,478	33,644
1936	202,861	27,205	53,837

Your Health! A New Radio Program for Schools by the American Medical Association.—The American Medical Association and the National Broadcasting Company present each week over the Red network a program of dramatized health messages intended to furnish graphic supplementary material for health teaching in junior and senior high schools. Much of this material is also useful for elementary schools, especially in the higher grades.

The program is broadcast each Wednesday from 2 to 2:30 p. m., eastern standard time, one hour earlier central time, two hours earlier mountain time, and three hours earlier Pacific time. The list of stations to which the program is available appears herewith. It should be noted that any station may or may not broadcast the program. Neither the American Medical Association nor the National Broadcasting Company has any control over local broadcasting, since this is a noncommercial program. Evidence of local interest may have influence with station managements.

The program will be presented in nine groups of four programs each, beginning October 13, 1937, and running

consecutively through June 15, 1938. Individual programs may be subject to cancellation for national or international emergencies calling for concentration of radio time in imperative public service. In such cases the subsequent dates will not be affected, but the canceled program will simply be dropped. The Red network includes the following California stations: KPO, San Francisco; KFI, Los Angeles; KFBK, Sacramento; KWG, Stockton; KMJ, Fresno; KERN, Bakersfield.

DATES AND TOPICS OF WEEKLY BROADCASTS 1937

Personal Health

- October 13—Learning About Health: Introductory, explanatory.
October 20—Growing for Strength and Beauty: Favorable and unfavorable factors in growth and the maintenance of normal weight.
October 27—Seeing and Hearing Well: Hearing and vision; how to conserve these; how to recognize deviations; how to prevent loss.
November 3—Striving for Better Bodies: So-called physical defects; their recognition; what can be done about them.

Hygiene

- November 10—Playing for Fun: Health values and hazards in sports and recreation, including football.
November 17—Fresh Air, Fresh Clothes and Fresh Skin: Ventilation; clothing; bathing.
November 24—Rest, Relaxation, Refreshment: All work and no play, or all play and no rest—bad for health.
December 1—Tuberculosis, Foe of Youth: How bad habits of hygiene and unwise living, plus infection, favor tuberculosis.

Diet

- December 8—It Takes All Good Foods: A well rounded diet and how to get it.
December 15—Milk from Farm to Table: The production, transportation, pasteurization and home care of milk; its place in the diet; processed milks.
December 22—Vitamins, Minerals and Common Sense: More about a balanced diet in special relation to minerals and vitamins.
December 29—Dietary Fads: Facts versus fallacies in relation to prevalent false notions about diet.

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Contagious Diseases

- January 5—Sneezes and Sniffles: Cause, spread, prevention of colds, pneumonia and influenza; importance of early medical care.
January 12—Scarlet Fever, Measles and Whooping Cough: Modern attitudes toward these diseases; their prevention by community coöperation.
January 19—Smallpox and Diphtheria: Unnecessary diseases; preventable by immunization of infants.
January 26—Poliomyelitis: Information about the disease; coöperation with President's Birthday Ball.

Diseases of Middle Age

- February 2—Rheumatism and Arthritis: Known factors in the causation of arthritis and its care.
February 9—Healthy Hearts and Arteries: Known ways of protecting the heart against infection and hygienic abuse; how to live with heart disease.
February 16—Don't Fear Cancer—Fight It: Known factors in the cause, prevention and treatment of cancer.
February 23—Overcoming Diabetes: Individual efforts plus medical aid will win against diabetes.

Public Health

- March 2—Water, Waste and Sanitation: Importance of community control of water supplies, sewage disposal and general sanitary matters.
March 9—Protecting Perishable Foods: What the community can and must do to protect fresh foods such as fish, fruits, vegetables, meats, bakery goods.
March 16—Keeping Books on Health: The meaning and the importance of vital statistics, contagious disease reporting and community health records.
March 23—Catching Disease from Animals: Rabbit fever, rabies, undulant fever and similar infections, and what can be done about them.

Health Education

- March 30—A Fool for a Day: Fallacies and popular beliefs that are not true and that influence behavior in a manner detrimental to health.

April 6—Living with People: Elements of mental hygiene; getting along with people; adjustment to the environment.

April 13—It May Happen to You: Accidents in the home and on the highway and ways to avoid them.

April 20—Who Chooses Your Doctor? The characteristics of a reputable physician as distinguished from cults, quacks, fakers, faddists or exploiters.

Mothers and Children

April 27—Healthier Babies: Daily routine of the healthy baby; medical supervision; feeding.

May 4—Healthier Mothers: General advice for the expectant mother; good for boys and girls to know about.

May 11—Hospitals Aid Health: The place of the hospital in the health program of the individual and the community.

May 18—Runabouts, 1938 Model: The preschool child and the health and personality problems of that age.

Using Health Knowledge

May 25—The Health Check-Up: Periodic health examination and what follows, and why.

June 1—Vacation Plays and Misplays: Making the vacation a real contribution to health and recreation.

June 8—Graduation and Then What? A new phase of life begins at commencement, and health contributes to success.

June 15—What Medicine Offers for Health: Flashes from the American Medical Association meeting at San Francisco, giving highlights of medical progress.

LETTERS

Concerning the October, 1937 session of the Association of American Medical Colleges in San Francisco.

STANFORD UNIVERSITY SCHOOL OF MEDICINE

September 3, 1937.

To the Editor:—The 1937 annual convention of the Association of American Medical Colleges will be held in San Francisco on October 25, 26, and 27. The programs on each of these mornings concern medical education and relations of medical schools to the medical profession.

The members of your Association are cordially invited to attend these sessions. The meetings will all take place at the Fairmont Hotel.

Very truly yours,

L. R. CHANDLER, M. D.,
Vice-President, Association of American Medical Colleges.

Concerning San Francisco Public Health Department suggestions on the subject of "Anterior Poliomyelitis."

CITY AND COUNTY OF SAN FRANCISCO

DEPARTMENT OF PUBLIC HEALTH

September 8, 1937.

To the Editor:—I am enclosing copy of a news release issued today on the subject of acute anterior poliomyelitis. I believe you will be interested in this material.

Sincerely,

J. C. GEIGER, M. D.,
Director of Public Health.

September 8, 1937.

The Present Status of the Situation With Reference to Acute Anterior Poliomyelitis

According to information received by the California State Department of Public Health, a sharp rise in the incidence of acute anterior poliomyelitis (infantile paralysis) during July and August has been reported from several counties, principally in the southern part of the state. As yet, this has not been apparent in San Francisco, as there were two cases reported in July, none in August, and two thus far in the month of September.

For the information of physicians and parents, the Director of Public Health wishes to go on record with regard to